# Heart Valve Replacement or Repair (VALVE) Episode Executive Summary

### **Episode Design**

- **Trigger:** heart valve replacement or repair procedure
- **Quarterback type:** facility (heart valve replacement or repair procedure site)
- Care included: all related care, including imaging and testing, surgical and medical procedures, physical therapy, and medications

#### **Sources of Value**

- Efficient pre-op imaging and testing (e.g., appropriate use of angiography)
- Increase operative efficiency (e.g., timeliness)
- Optimize length of ICU stay
- Reduce in-hospital complications and infections (e.g., hospital acquired pneumonia)
- Appropriate selection of valve replacement or repair
- Appropriate graft selection for patients receiving concurrent CABG
- Appropriate post-acute care (e.g., use of SNFs, IRFs)
- Efficient use of follow-up imaging
- Appropriate use of medications
- Reduce readmissions
- Reduce complications (e.g., deep sternal wound infection)

## **Episode Duration**

Pre-Trigger

Trigger

Post-Trigger

No pre-trigger window

Duration of the episodetriggering visit or stay

30 days, beginning after
discharge from hospital

# **Quality Metrics**

**Tied to Gain-Sharing** 

[This section is not applicable to this episode.]

#### **Informational Only**

- Follow-up care within the post-trigger window
- · Admission within the post-trigger window
- Major morbidity
- Mortality
- Difference in average morphine equivalent dose (MED) per day

## **Making Fair Comparisons**

#### **Exclusions**

- Business exclusions: inconsistent enrollment, third-party liability, dual eligibility, FQHC/RHC, no PAP ID, incomplete episodes, overlapping episodes
- Clinical exclusions: different care pathway (e.g., ischemia-related admission, pre-existing endocarditis, pre-existing pneumonia on admission, DCS custody)
- Patient exclusions: age (less than 18 or greater than 64 years old), death, left against medical advice
- High-cost outlier: episodes with risk-adjusted spend greater than three standard deviations above the average risk-adjusted episode spend for valid episodes are excluded.

**Risk adjustment** is used to ensure appropriate comparisons between patients.

**To learn more about the episode's design**, please reference the Detailed Business Requirements (DBR) and Configuration File on our website at <a href="https://www.tn.gov/tenncare/health-care-innovation/episodes-of-care/searchable-episodes-table.html">https://www.tn.gov/tenncare/health-care-innovation/episodes-of-care/searchable-episodes-table.html</a>.

